

**APPLICATION DATA SHEET**

**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter: Utility

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:: No

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: METHOD AND APPARATUS FOR DETERMINING  
PROPERTIES OF AN ELECTROPHORETIC DISPLAY

Attorney Docket Number:: INK-045CPC1

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets:: 10

Small Entity?:: No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Joseph

Middle Name:: M.

Family Name:: Jacobson

City of Residence:: Newton Centre

State or Province of Residence:: MA

Country of Residence:: US  
Street of Mailing Address:: 223 Grant Avenue  
City of Mailing Address:: Newton Centre  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 02159

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Paul  
Family Name:: Drzaic  
City of Residence:: Lexington  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of Mailing Address:: 6234 Lexington Ridge Drive  
City of Mailing Address:: Lexington  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 02421

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Steven  
Middle Name:: J.  
Family Name:: O'Neil  
Name Suffix::  
City of Residence:: Pembroke  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of Mailing Address:: 60 Juniper Lane  
City of Mailing Address:: Pembroke

State or Province of Mailing Address:: MA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 02359

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: USA  
Status:: Full Capacity  
Given Name:: Holly  
Middle Name:: G.  
Family Name:: Gates  
City of Residence:: Somerville  
State or Province of Residence:: Massachusetts  
Country of Residence:: USA  
Street of Mailing Address:: 189 Summer Street, #2  
City of Mailing Address:: Somerville  
State or Province of Mailing Address:: Massachusetts  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: 02143

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Justin  
Middle Name::  
Family Name:: Abramson  
Name Suffix::  
City of Residence:: Somerville  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of Mailing Address:: 240 Cedar Street, Apt. 3  
City of Mailing Address:: Somerville  
State or Province of Mailing Address:: MA  
Country of Mailing Address:: US

Postal or Zip Code of Mailing Address::

**Correspondence Information**

Correspondence Customer Number:: 021323

**Representative Information**

Representative Customer Number:: 021323

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/277,527	10/22/02
10/277,527	Continuation-in-part of	09/349,808	07/08/99
09/349,808	Non-Provisional of	60/092,046	07/08/98

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee Name:: E Ink Corporation

City of Mailing Address:: Cambridge

State or Province of Mailing Address:: MA

Country of Mailing Address:: USA